

10/8/3101

(Column 1)

(Column 2)

| SMALL ENTITY | |
|--------------|----------|
| RATE (\$) | FEE (\$) |
| | |
| | |
| | |
| X | |
| X | |
| | |
| | |
| | |
| TOTAL | |

OR OTHER THAN
SMALL ENTITY

| RATE (\$) | FEE (\$) |
|-----------|----------|
| | |
| | |
| | |
| X | |
| X | |
| | |
| | |
| | |
| TOTAL | |

TOTAL

TOTAL

(Column 1)

(Column 2)

(Column 3)

| SMALL ENTITY | |
|-----------------|---------------------|
| RATE (\$) | ADDITIONAL FEE (\$) |
| x 25 = | |
| x 100 = | |
| 180 | |
| TOTAL ADD'L FEE | |

OF

OTHER THAN
SMALL ENTITY

| RATE (\$) | ADDITIONAL FEE (\$) |
|-----------|---------------------|
| x 50 = | |
| x 200 = | |
| 360 | |
| TOTAL | |
| ADD'L FEE | |

(Column 1)

(Column 2)

(Column 'g')

| RATE (\$) | ADDITIONAL FEE (\$) |
|-----------|---------------------|
| X | |
| X | |
| | |
| TOTAL | ADD'L FEE |

O.F.

RATE (\$)

ADDI-

| RATE (\$) | ADDITIONAL FEE (\$) |
|--------------------|---------------------|
| X | = |
| X | = |
| | |
| | |
| TOTAL ADD'L FEE | |

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is less than 3, enter "3"

Collection of Information is required by 37 CFR 1.16. The information is required to obtain

gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments

SS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS OFFICE.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.